



2011 Military Health Systems Conference

Wounded Warriors: Challenges and Care Coordination



Warrior Transition Brigade

LTC Jean Jones
Senior Nurse Case Manager

Report Documentation Page				Form Approved OMB No. 0704-0188	
Public reporting burden for the collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington VA 22202-4302. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to a penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.					
1. REPORT DATE JAN 2011		2. REPORT TYPE		3. DATES COVERED 00-00-2011 to 00-00-2011	
4. TITLE AND SUBTITLE Wounded Warriors: Challenges and Care Coordination				5a. CONTRACT NUMBER	
				5b. GRANT NUMBER	
				5c. PROGRAM ELEMENT NUMBER	
6. AUTHOR(S)				5d. PROJECT NUMBER	
				5e. TASK NUMBER	
				5f. WORK UNIT NUMBER	
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Walter Reed Army Medical Center,Warrior Transition Brigade,8901 Rockville Pike,Bethesda,MD,20889				8. PERFORMING ORGANIZATION REPORT NUMBER	
9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)				10. SPONSOR/MONITOR'S ACRONYM(S)	
				11. SPONSOR/MONITOR'S REPORT NUMBER(S)	
12. DISTRIBUTION/AVAILABILITY STATEMENT Approved for public release; distribution unlimited					
13. SUPPLEMENTARY NOTES presented at the 2011 Military Health System Conference, January 24-27, National Harbor, Maryland					
14. ABSTRACT					
15. SUBJECT TERMS					
16. SECURITY CLASSIFICATION OF:			17. LIMITATION OF ABSTRACT Same as Report (SAR)	18. NUMBER OF PAGES 31	19a. NAME OF RESPONSIBLE PERSON
a. REPORT unclassified	b. ABSTRACT unclassified	c. THIS PAGE unclassified			

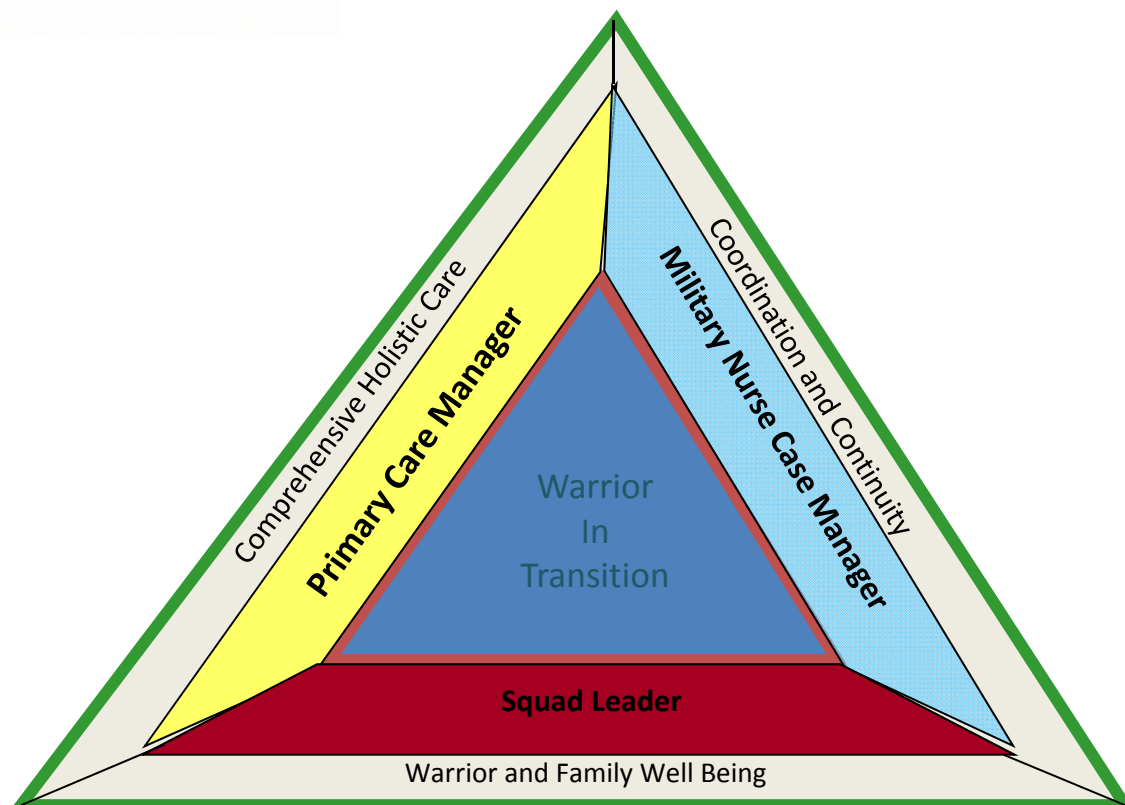


Warrior Transition Units

- Mission
 - To facilitate the healing and rehabilitation of Soldiers, return them to duty when possible, or to prepare them for a successful life as a veteran in their communities.
 - 36 WTUs
 - 9 Community Based Warrior Transition Units



Triad of Care



Holistic Care Foundation
Social Work Services, Occupational Therapy, Physical Therapy,
AW2, Federal Recovery Coordinators,
Soldier and Family Assistance Center (SFAC), and Chaplains

2/3/2012





Nurse Case Manager

- Provide Care Coordination for Warrior and Family.
 - Assistance with navigating the Military Health Care System
 - Appointment management
 - Referral Coordination
 - Risk Assessments
 - Evaluation of Care
 - Advocacy
 - Education
 - Family Integration
 - Communication
 - Expectation Management





Primary Care Manager

- Provide overall management of medical care activities.
 - Overall medical management of Warrior
 - Coordination with medical specialists
 - Referral Management
 - Referral Coordination
 - Risk Assessments
 - Evaluation of Care
 - Advocacy
 - Education
 - Medical Board Referral
 - Expectation Management



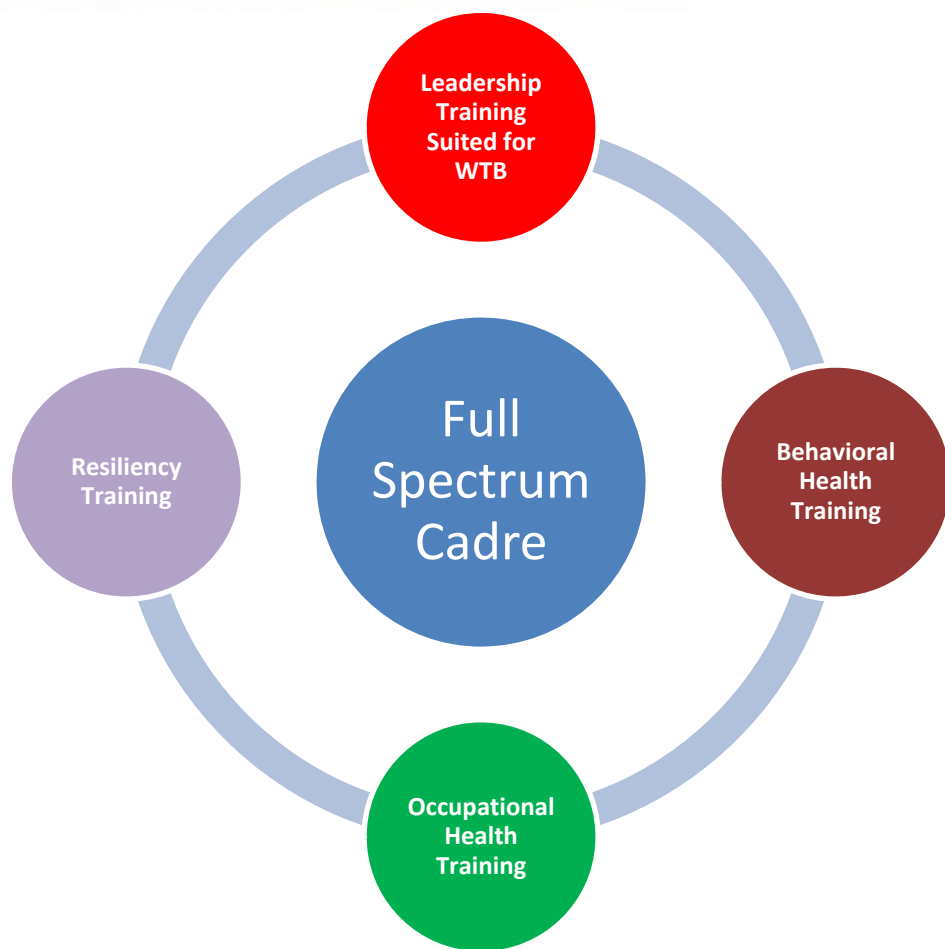


Squad Leader

- Interfaces daily with Warrior and the Warrior's Nurse Case Manager
- First line supervisor
- Assists Warrior with moving through the Military Health Care System
- Facilitates all administrative issues for the Warrior and Family
- Assists Warrior's Family with integrating into the Warrior Transition Brigade and the Military Health Care System
- Expectation Management



Full Spectrum Training



2/3/2012





Soldier and Family Assistance Center

- Provide and coordinate various resources and services for Wounded Warriors receiving medical care and their Families.
 - Finance
 - Emergency Financial Assistance
 - ID Cards – DEERS
 - Travel Services
 - Military Personnel
 - Lodging
 - TSGLI Assistance
 - Social Service Administration
 - Veterans Briefings and VA Assistance
 - Legal Assistance
 - Sister Service Liaison





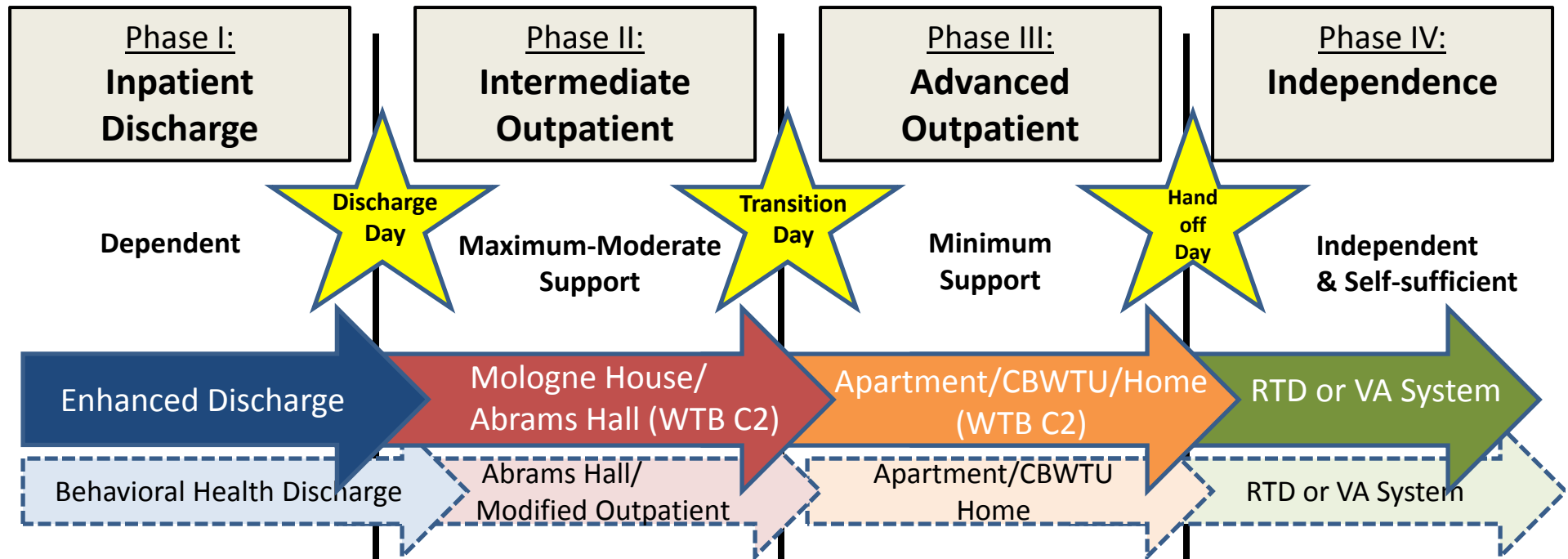
Army Wounded Warrior Program

- Provides a wide services in order to help Warriors and their Families recover physically, financially, and build their skills for a rewarding life and career either in the military or in the civilian community - “For as long as it takes”.
 - Career and Education
 - Finance
 - Healthcare
 - Human Resources
 - Insurance
 - Retirement and Transition
 - Services for Families



WTB Warrior Lifecycle

“Full Spectrum Discharge Process”



Admission: WTs arrive via Air Evac system or Unit request related to medical condition. Up to 3 family members given TTO orders (government limo pick up)

Housing: WT identified for discharge at D-7 (for BH within 48 hours of admission) to generate “tailored” housing requirements; Inpatient OT completes detailed lodging assessment when needed

CTP: Intake; Goal Setting; Self Assessment

Life Skills Intervention: Time Management; Sleep Hygiene; Nutrition

Assistive Technology: Independent access to computer and communication systems

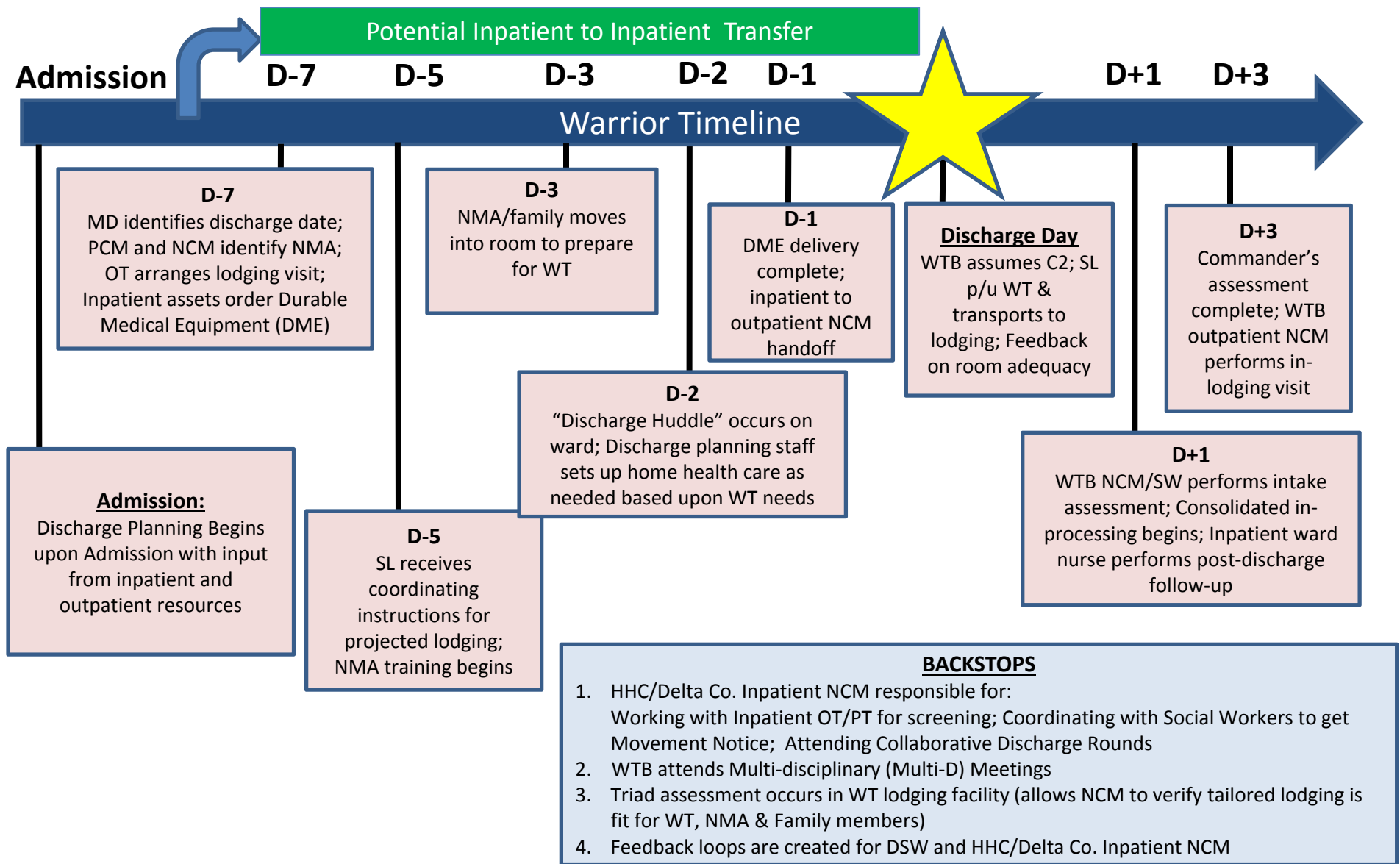
Work and Education: Mapping out tentative career path and engaging in tasks that support it

CTP: Azimuth Check
Life Skills Intervention: Home Management; Budgeting; Transportation

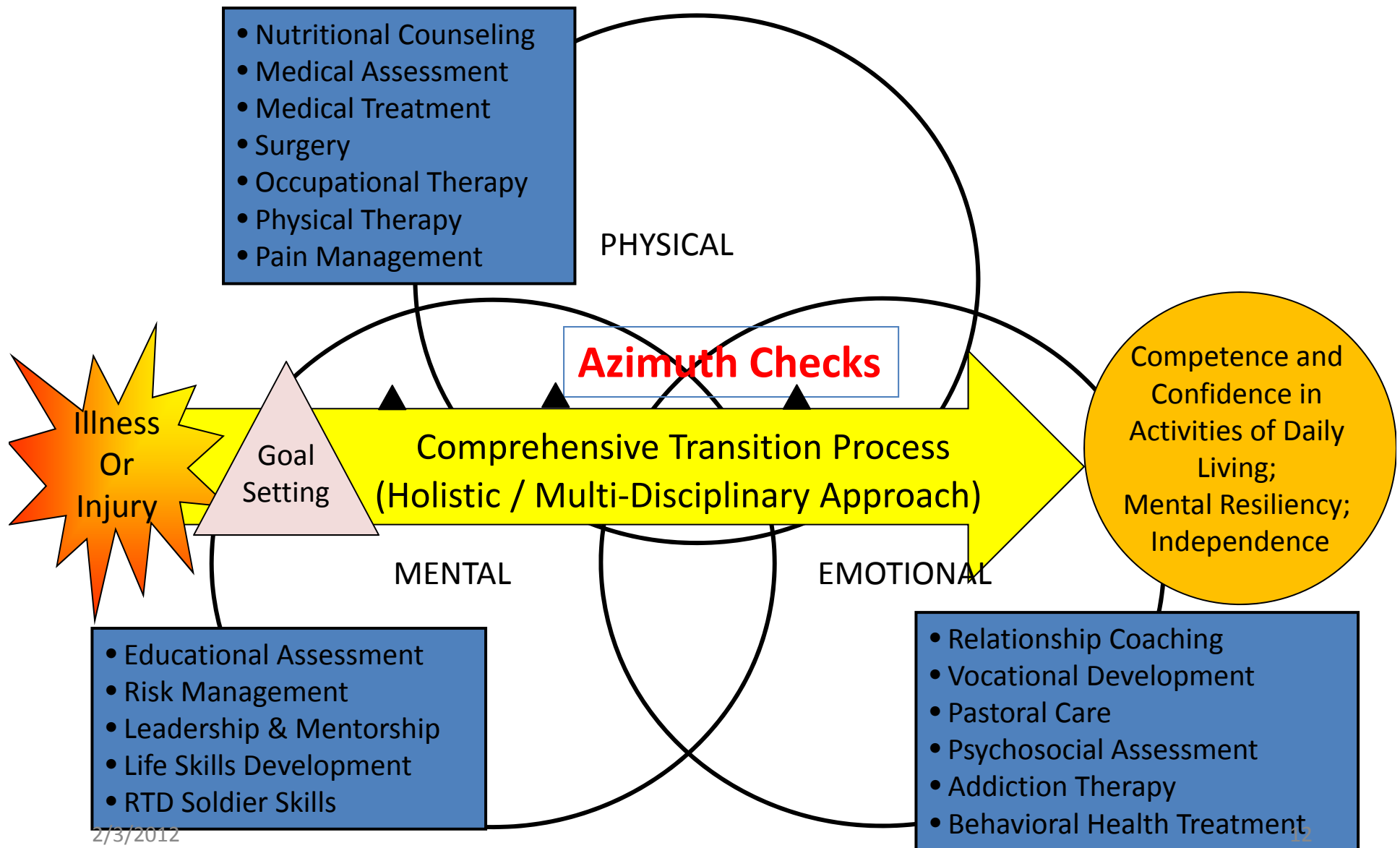
Assistive Technology: Enabling independence in work & education settings
Work & Education: Increase in time spent participating in education and internship opportunities

CTP: Continued progress on personal goals and handoff to Federal Recovery Coordinator as needed
Life Skills: Independent with personal and family management using learned skills
Work and Education: Transition to RTD, gainful employment, and/or successful student

Best Practice: Enhanced Discharge Process



Phase II & IV: Intermediate/Advanced Outpatient Comprehensive Transition Process



Automated Comprehensive Transition Plan

WT Demographic Info

Options

Pim, Stuart Nelson (stuart.pim)[Active]

SSN: ****-**-5555
Rank: E-3 PFC
AOC/MOS: 81B
COMPO: 3 - Reserve
DOB: 4/4/1962
Gender: Male
Home Address: 123 Main St
City: Hometown
State: IA
Zip: 50265
Home Phone: 555.555.5555
Cell Phone: 706.555.1212

Alternate POC Name: Next of Kin Name
Alternate POC Phone: Next of Kin Phone
Duty Phone:
Duty Phone Ext:
Reason for WTU Entry: POST-DEPLOYMENT
WTU Start Date: 1/28/2010
Target Transition Date:
Wounded in Action: No
RMC: NRMCM
WTU / CBWTU: Fort Vienna
Assignment: C CO 5th PLT 4th SQ

WT Self-Assessments

Options

Columns Views Filters

Assigned	Completed	Status	ADLs	Adm	Bhv Hlth	Care Coord	Ed	Emp	Fam	Fin	Hlth Care	Hou	Med	Pain	Soc	Tran	Tr - Port	Well Bng	Work Plan
Jan 28, 2010		Active	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WT Self-Assessment Action Plans

Options

Columns Views Filters

Category	Current Assessment	# Completed Items	# Total Action Items	# Active Tasks
ADLs	<input type="checkbox"/>	0	0	0
Administrative	<input type="checkbox"/>	0	0	0
Behavioral	<input type="checkbox"/>	0	0	0
Health	<input type="checkbox"/>	0	0	0
Care	<input type="checkbox"/>	0	0	0
Coordination	<input type="checkbox"/>	0	0	0
Education	<input type="checkbox"/>	0	0	0
Employment	<input type="checkbox"/>	0	0	0
Family	<input type="checkbox"/>	0	0	0
Financial	<input type="checkbox"/>	0	0	0
Health Care	<input type="checkbox"/>	0	0	0
Housing	<input type="checkbox"/>	0	0	0
Medication	<input type="checkbox"/>	0	0	0
Pain	<input type="checkbox"/>	0	0	0
Social	<input type="checkbox"/>	0	0	0
Transition	<input type="checkbox"/>	0	0	0
Transportation	<input type="checkbox"/>	0	0	0
Well-Being	<input type="checkbox"/>	0	0	0
Work Plan	<input type="checkbox"/>	0	0	0

Available Actions

Options

1. Start Risk Assessment
2. Update Demographics
3. Generate WT Handbook
4. Record WT Process Note
5. Out-Process WT
6. Cancel WT Process

Re-Assignment Options

Options

1. Update User Roles
2. Change WT Assignment

WT Risk Assessments

Options

Columns Views Filters

Assigned	Commander	SL	SW	NCM	PCM
Jan 28, 2010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Scrimmage & Goal Setting

Options

Columns Views Filters

Career Track	Goal Setting Method	Career Outcome Goal

WT Process Log

Options

Columns Views Filters

Added By	Comment	Added On

Holistic Approach to Warrior Care

Occupational Therapy



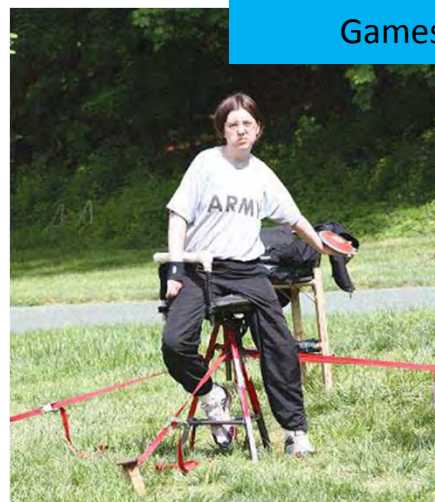
Service Dogs



Warrior Games



Assistive Technologies



Warrior Knowledge Center

This webpage is currently under development and your feedback is important to create a webpage that is useful to all Warriors in Transition, Family and Friends. Thank You



Phonebook



S.O.S.



Welcome Center



Comprehensive
Transition Plan (CTP)



Social Networking



Family Support



Getting Around
Locally



Travel and
Transportation



MEB / PEB



Appointment
Scheduling



Health



Benefits

Families and the Reintegration Process

- Inpatient Family Assessments
- New Warrior and Family Orientation
- Outpatient Care
 - Support Groups
 - WTB Social Work Services
 - Computer Assisted Therapies





Lessons Learned



- Warriors and their Family are a System
- Expectation Management

- Warriors

- Reintegration begins upon entry
- It takes a Team
- Multiple options
- Embrace new normal early
- Empowerment is key

- Families

- Provide support early and often
- Create trust environment with Families
- Children deserve special care
- Listen



Warrior Care



I am a Warrior in Transition

My job is to heal as I transition back to duty or
continue serving the nation as a veteran in my
community.

This is not a status, but a mission.

I will succeed in this mission because

I AM A WARRIOR AND I AM ARMY STRONG



Effective Handoffs and Individualized Care Plans

- Warrior Transition Units
- Triad of Care
- Non-Clinical Case Management
 - Squad Leader
 - Company Commander
 - Soldier and Family Assistance Center
 - Army Wounded Warrior Program
 - Federal Recovery Coordinator
- Interface with Clinical Case Management and Primary Care Managers
- Effective Handoffs





Company Commander

- Provides Command and Control of Warriors
- Responsibilities include:
 - Unit readiness including Warrior safety and Family Re-integration
 - Risk Mitigation
 - Warrior Transition
 - Morale
 - Discipline
 - Physical Fitness





Key Handoffs

- Discharge from Inpatient
 - Lodging
 - Inprocessing – finance, order issue, training
 - Family integration, TSGLI
- Outpatient Management
 - MEB / DES process
 - Benefit and Legal Assistance
 - Veteran Administration Benefits
 - Community Resources
 - Work and Education Planning
- Transition to Independence
 - Community Resources
 - Internships
 - Education Programs
 - Housing
 - VA Claims
 - VA Vocational programs

2/3/2012





2011 Military Health Systems Conference

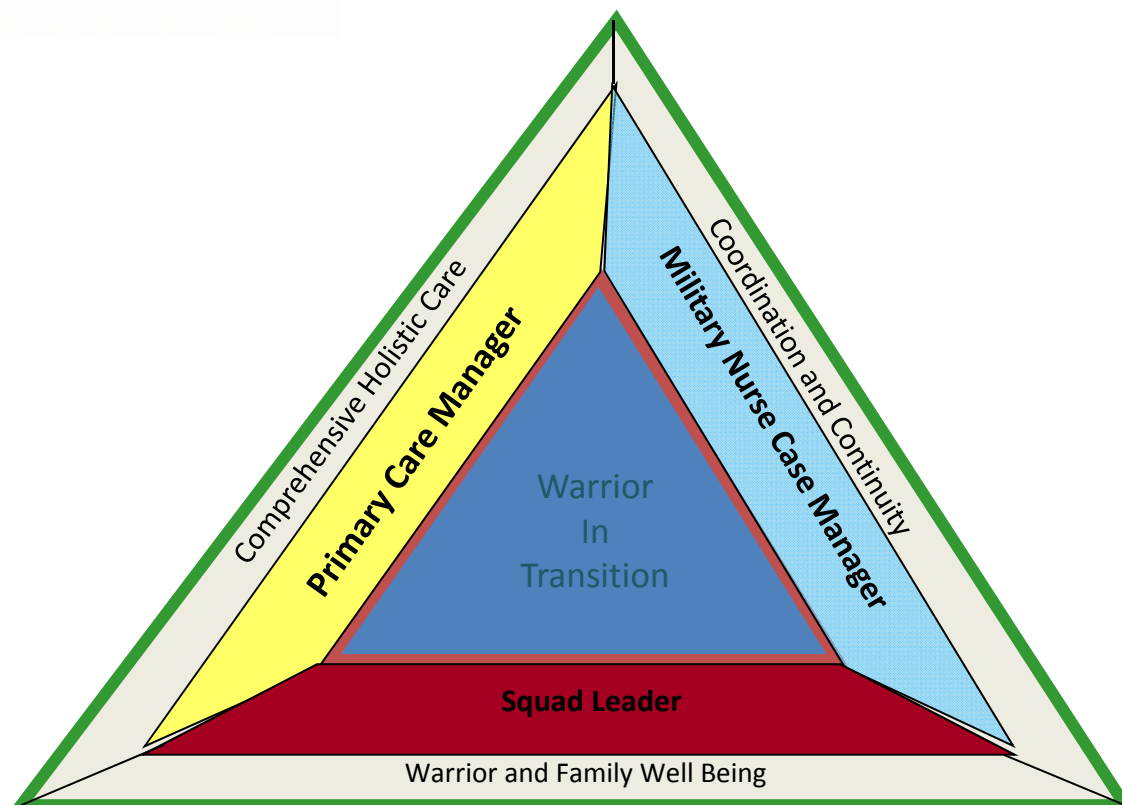
Effective Handoffs and Individualized Care Plans



Warrior Transition Brigade

LTC Jean Jones
Senior Nurse Case Manager

Triad of Care

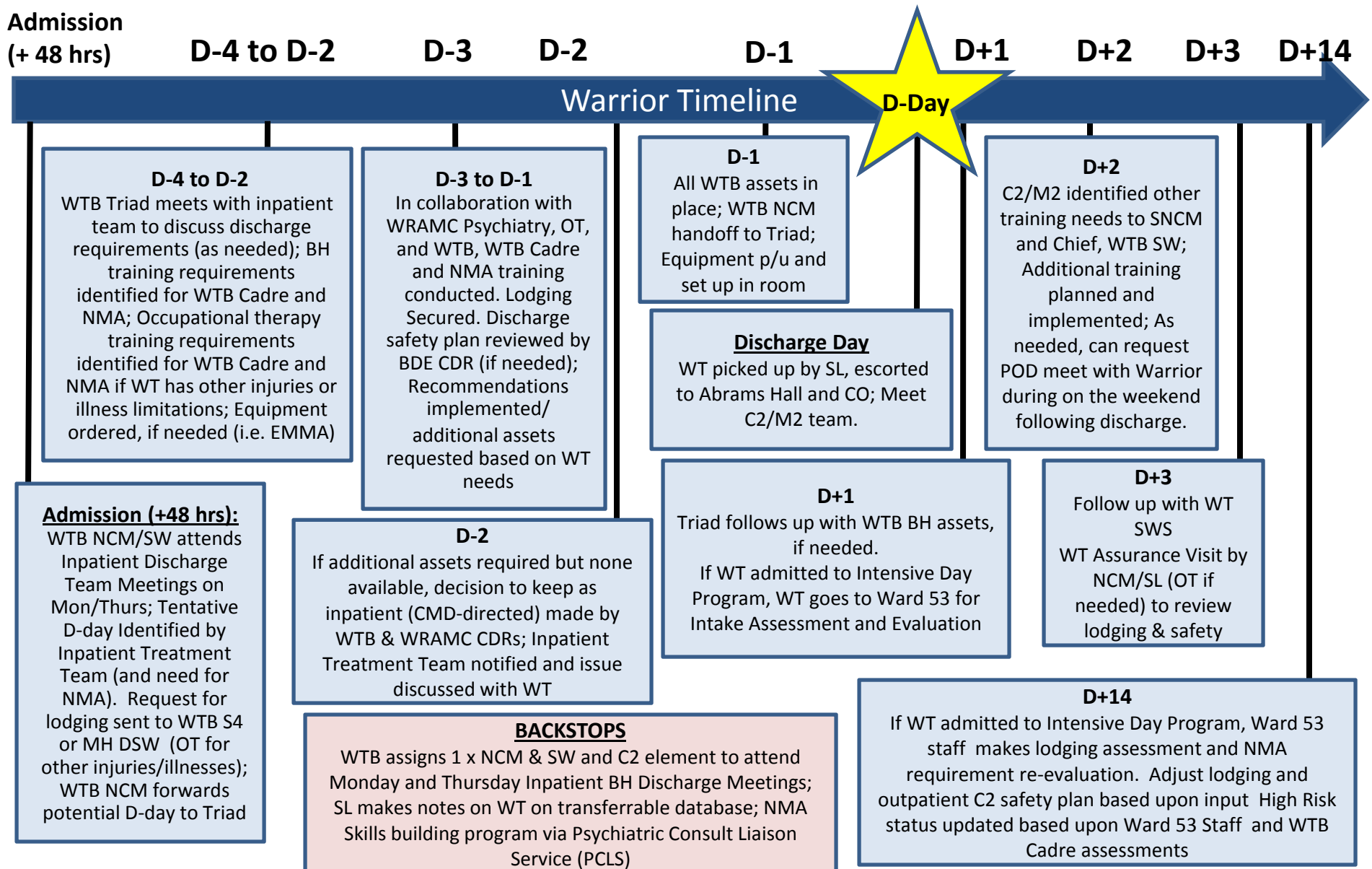


Holistic Care Foundation
 Social Work Services, Occupational Therapy, Physical Therapy,
AW2, Federal Recovery Coordinators,
Soldier and Family Assistance Center (SFAC), and Chaplains

2/3/2012

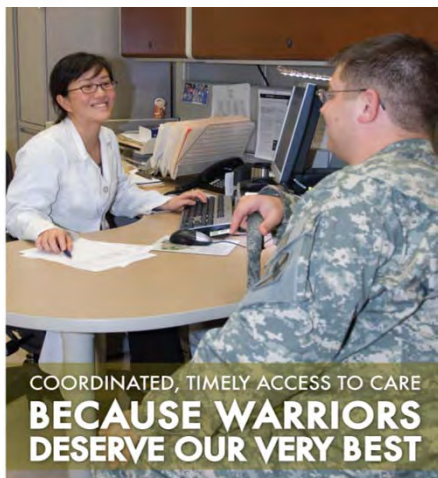


Phase I: Behavioral Health Discharge Process (Inpatient)



Expectation Management

It takes a Team...



Providers



Companies



Soldier and Family Assistance Center



Facilities
Management



Job Fairs



Case Review – S/P IED Blast

- 22 y/o E4 S/P IED blast with the resulting injuries below the knee amputation, pelvic fracture, multiple soft tissue injuries, mild TBI
- Diagnosed with PTSD 6 months after arrival
- Warrior desired to remain on Active Duty
- Supportive family
- Key handoffs
 - Inpatient to outpatient
 - Family
 - Medical Board and the DES
 - Army level - Human Resources
 - New Command
 - MTF at new unit

Case Review – Behavioral Health

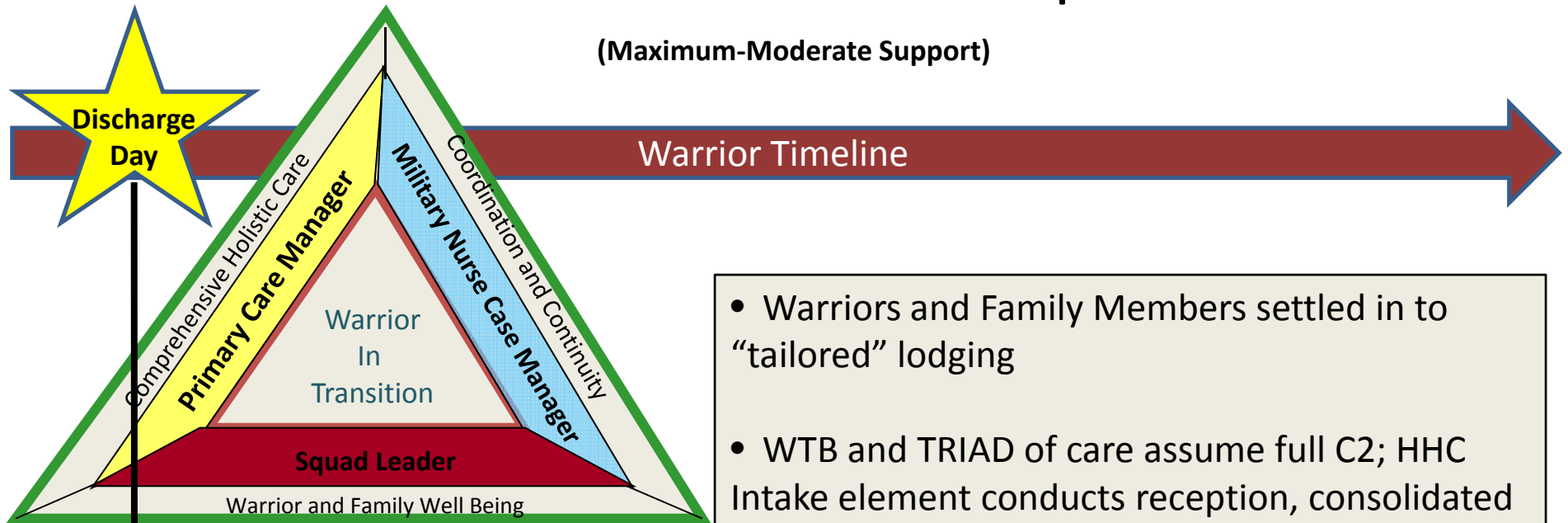
- 24 y/o E4 diagnosed with Mood Disorder while attending Advanced Individual Training (AIT). No deployment experience
 - After 2 unsuccessful suicide attempts was admitted to WRAMC's behavioral health inpatient ward.
 - Soon after discharge and return to unit, SM had 2 additional suicide attempts. Readmitted to WRAMC and admitted to WTB.
 - No supportive family located
 - Key Handoffs
 - Inpatient to Outpatient
 - Outpatient Providers
 - Medical Board
 - Community resources in new home location
 - VA

Case Review – S/P RPG Blast

- 35 y/o CPT S/P RPG Blast with the receiving injuries: Moderate to Severe TBI with cranioplasty, right arm amputation below the elbow (right hand dominate), and multiple soft tissue injuries.
- Dysfunctional family system
- Warrior wants to remain on Active Duty however unknown response to therapy at this time
- Key Handoffs
 - Inpatient to Outpatient
 - Outpatient providers
 - Medical Board
 - VA
 - Legal Assistance
 - Home Community

Phase II: Intermediate Outpatient

(Maximum-Moderate Support)



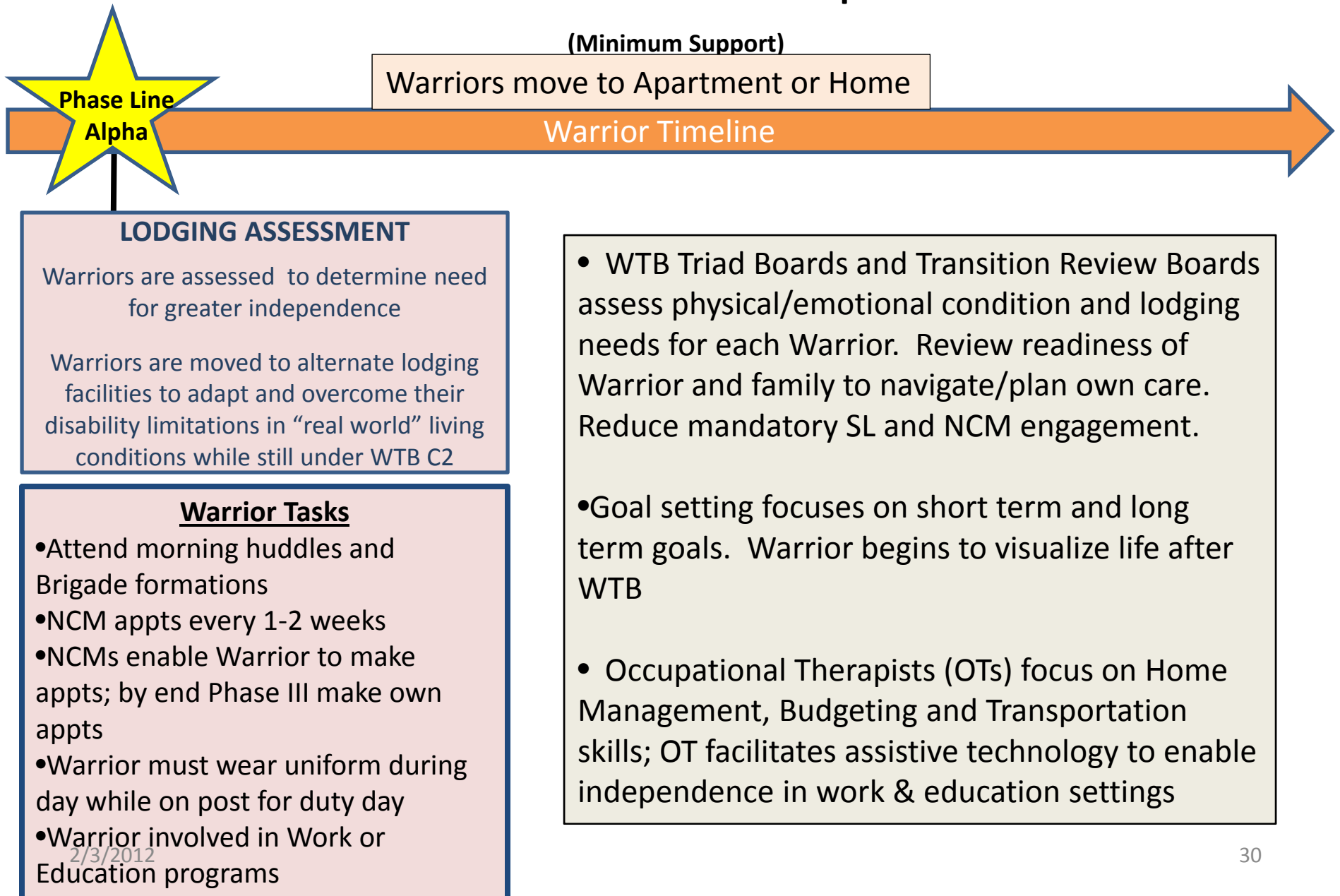
Warrior Tasks

- Twice Daily Huddles
- NCM appts weekly
- NCMs make all appts
- Warriors wear uniform and required to be on post during duty day
- Warriors are subject to taskings and duty rosters (toward end of Phase II)

2/3/2012

- Warriors and Family Members settled in to "tailored" lodging
- WTB and TRIAD of care assume full C2; HHC Intake element conducts reception, consolidated In-processing, and training within first 30 days, then WTs are moved to "Line" Companies
- Comprehensive Transition Plan (CTP) is initiated to focus on Holistic Care; initial Goal Setting looks at weekly goals. A tentative career path is discussed (and mapped out depending upon Warrior's physical and emotional readiness).
- Warriors and Family Members meet with AW2

Phase III: Advanced Outpatient



Phase IV: Independence

